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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------|---------|-------------|--|
| No. <b>W 49233</b>                                                                                                                                     |                 | <b>Due no later than Apr 30, 2014</b>                                                                                                                            |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>   |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>EMPIRE CONSTRUCTION COMPANY, LLC<br>ALEX MACDONALD<br>380 W. STATE ST.<br>EAGLE ID 83616<br>USA |       | ALEX MACDONALD<br>380 W. STATE ST.<br>EAGLE ID 83616 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                  |       | 3. <u>New</u> Registered Agent Signature:*           |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                 |                                                                                                                                                                  |       |                                                      |         |             |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                             | City  | State                                                | Country | Postal Code |  |
| MANAGER                                                                                                                                                | BECKY MACDONALD | 921 W. RUSH RD                                                                                                                                                   | EAGLE | ID                                                   | USA     | 83616       |  |
| MANAGER                                                                                                                                                | ALEX MACDONALD  | 921 W. RUSH RD                                                                                                                                                   | EAGLE | ID                                                   | USA     | 83616       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 49233</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Alex Macdonald<br>Name (type or print): Alex Macdonald<br>Date: 05/08/2014<br>Title: Manager                     |       |                                                      |         |             |  |
| Processed 05/08/2014                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                        |       |                                                      |         |             |  |